PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10 66003C

		CLAIMS AS	(Column 1)		(Column 2)			SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			17					RATE	FEE) I	RATE	FEE
FOR			NUMBER FILED			NUMBER EXTRA		BASIC FEE		OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/ ninus 20=		* cf			X\$ 9=	!	OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 0			-X42≡-		OR	X84≡	
MU	LTIPLE DEPEN	IDENT CLAIM P	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than zero, enter "0"			olumn 2	1	TOTAL	375	OR	TOTAL	
CLAIMS AS AMENDED - PART II											OTHER	THAN
(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	nus *** IPLE DEPENDENT C		=		X42=		OR	X84=	
L	PIRST PRESE	INTATION OF M	ULTIPLE DE	PENDEN	CLAIM			+140=		OR	+280=	
								TOTAL		OR	TOTAL ADDIT. FEE	
			ADDIT. FEE			ADDII. FEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=		X42=		OR	X84=	
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140= .		OR	+280=	
							ı	TOTAL			TOTAL	
		(Column 1)		(Colu	mn 2)	(Column 3)	•	addit. Fee i	L	On	ADDIT. FEE	L
AMENDMENT C		CLAIMS		HIGH	HEST		lr		ADDI-	1		ADDI-
		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	,
WE WE	Independent	*	Minus	***		=		X42=			X84=	
匚	FIRST PRESE	NTATION OF M	ULTIPLE DEPENDENT		T CLAIM	IM				OR		
	If the entry in colu	ımn 1 is less than t	the entry in col	umn 2 weit	e "O" in co	lumn 3		+140=		OR	+280=	
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE											
1	The "Highest Nur	mber Previously Pa	aid For" (Total	or Independ	dent) is the	highest numbe	er fou	and in the app	propriate bo	x in co	lumn 1.	